Montana Medicaid - Fee Schedule Dental Hygienist January 1, 2013

Definitions:

Modifier – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination. For example:

EP = EPSDT service (Early Periodic Screening Diagnosis and Treatment)

Description – Procedure code description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable.

Method – Source of fee determination

Fee Sched: Based on Relative Value for Dentists (RVD) X Montana Medicaid Dental Conversion Factor. Conversion factor for fiscal year 2013 is \$31.27

Medicare: Medicare-prevailing fee.

By Report (BR): Equals 85% of billed charges for CDT codes.

Anes Value: Number of anesthesia base value units

RBRVS: Based on Medicare Relative Value Units (RVU's) x Montana Medicaid conversion factor x policy adjuster

Global - Global surgery indicator. Global surgery periods are pre- and post-operative time frames assigned to surgical procedures.

Space: Global concept does not apply to this code

000: Same day as procedure

010: Same day and ten days following procedure

090: One day prior to and ninety days following procedure

MMM: In maternity cases, the usual global period does not apply

PA – Prior Authorization

Y: Prior authorization is required

Space: Prior authorization is not required

Relative Values for Dentists (RVD) - copyright 2006. Published by Relative Value Studies, Inc. Broomfield Colorado CPT codes, descriptors, and other data only are copyright 19999 American Medical Association (or such other date of publication of CPT) All Rights Reserved. Applicable FARS/DFARS Apply

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Proc	Mod	Description	Effective	Method	Fees	PA	Min Age	Max Age	Notes
D0210		INTRAOR COMPLETE FILM SERIES	8/1/2011	FEE SCHED	\$62.54		000	999	Min of 14 films; 1 film = 1 unit of service; Adults 1 every 3 years
D0220		INTRAORAL PERIAPICAL FIRST F	8/1/2011	FEE SCHED	\$15.64		000	999	
D0230		INTRAORAL PERIAPICAL EA ADD	8/1/2011	FEE SCHED	\$7.82		000	999	
D0240		INTRAORAL OCCLUSAL FILM	8/1/2011	FEE SCHED	\$18.76		000	999	
D0270		DENTAL BITEWING SINGLE FILM	8/1/2011	FEE SCHED	\$15.64		000	999	Adults 4 films per year
D0272		DENTAL BITEWINGS TWO FILMS	8/1/2011	FEE SCHED	\$18.76		000	999	Adults 4 films per year
D0274		DENTAL BITEWINGS FOUR FILMS	8/1/2011	FEE SCHED	\$31.27		000	999	Adults 4 films per year
D0330		DENTAL PANORAMIC FILM	8/1/2011	FEE SCHED	\$50.03		000	999	Adults 1 film every 3 years
D1110		DENTAL PROPHYLAXIS ADULT	8/1/2011	FEE SCHED	\$46.91		000	999	Every 6 months
D1120		DENTAL PROPHYLAXIS CHILD	8/1/2011	FEE SCHED	\$31.27		000	999	
D1208		TOPICAL APP OF FLUORIDE	1/1/2013	FEE SCHED	\$15.64		000	999	
D1320		TOBACCO COUNSELING	8/1/2011	FEE SCHED	\$34.40		000	999	
D1351		DENTAL SEALANT PER TOOTH	8/1/2011	FEE SCHED	\$25.02		000	020	First and second molars only
D4341		PERIODONTAL SCALING & ROOT	8/1/2011	FEE SCHED	\$156.35		000	999	1 unit= 1 quadrant 4 units per yr, list quadrant in 'tooth # column' on claim form
D4342		PERIODONTAL SCALING 1-3TEETH	8/1/2011	FEE SCHED	\$84.43		000	999	2 unit= 1 quadrant 4 units per yr, list quadrant in 'tooth # column' on claim form